

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:
ALONZO M HINES JR
Debtor(s)

Case No. 15-01621

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 01/19/2015.
- 2) The plan was confirmed on 05/12/2015.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 08/22/2017.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 05/09/2018.
- 6) Number of months from filing to last payment: 40.
- 7) Number of months case was pending: 44.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$1,501.00.
- 10) Amount of unsecured claims discharged without payment: \$21,425.84.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$6,478.13
Less amount refunded to debtor	\$178.13

NET RECEIPTS:	\$6,300.00
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Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$3,524.75
Court Costs	\$0.00
Trustee Expenses & Compensation	\$277.31
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION:	\$3,802.06
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Attorney fees paid and disclosed by debtor:	\$475.25
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Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
CDA PONTIAC	Unsecured	850.00	3,495.00	3,495.00	799.64	0.00
CITY OF CHICAGO DEPT OF REVENUE	Unsecured	3,000.00	5,384.40	5,384.40	1,231.93	0.00
COLUMBIA HOUSE	Unsecured	74.00	NA	NA	0.00	0.00
COMCAST	Unsecured	326.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	377.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	608.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	377.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	26.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	608.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	738.00	NA	NA	0.00	0.00
CRANDON EMERGENCY PHYSICIAN	Unsecured	621.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	312.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	466.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	696.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	1,171.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	277.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	277.00	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	314.00	NA	NA	0.00	0.00
EMERGENCY ROOM CARE PROVIDE	Unsecured	461.00	NA	NA	0.00	0.00
EMERGENCY ROOM CARE PROVIDE	Unsecured	537.00	NA	NA	0.00	0.00
LAKESIDE RADIOLOGISTS	Unsecured	165.00	NA	NA	0.00	0.00
MEIJER INC	Unsecured	332.00	NA	NA	0.00	0.00
METROSOUTH MEDICAL CENTER	Unsecured	889.00	NA	NA	0.00	0.00
MIDLAND CREDIT MANAGEMENT	Unsecured	NA	1,711.88	1,711.88	391.67	0.00
RAD ADVANTAGE	Unsecured	40.00	NA	NA	0.00	0.00
SPRINT	Unsecured	326.00	NA	NA	0.00	0.00
SPRINT NEXTEL	Unsecured	327.00	326.50	326.50	74.70	0.00
SUK S LEE MD INC	Unsecured	320.00	NA	NA	0.00	0.00
T MOBILE	Unsecured	452.00	NA	NA	0.00	0.00
Trident Asset Manageme	Unsecured	1,213.00	NA	NA	0.00	0.00
TRIPLE S MEDICAL CARE	Unsecured	663.00	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
UNIVERSAL RADIOLOGY	Unsecured	83.00	NA	NA	0.00	0.00
UNIVERSAL RADIOLOGY	Unsecured	82.00	NA	NA	0.00	0.00
WASHINGTON MUTUAL	Unsecured	175.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$0.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$10,917.78	\$2,497.94	\$0.00

Disbursements:

Expenses of Administration \$3,802.06
Disbursements to Creditors \$2,497.94

TOTAL DISBURSEMENTS : **\$6,300.00**

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 09/05/2018

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.